

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT – POWER OF ATTORNEY		Patent Number	6,931,723
OR		Issue Date	August 23, 2005
REVOCATION OF POWER OF ATTORNEY		First Named Inventor	Douglas O. Powell
WITH A NEW POWER OF ATTORNEY		Title	ORGANIC DIELECTRIC ELECTRONIC INTERCONNECT STRUCTURES AND
AND		Attorney Docket No.	TIPI 3.0-036
CHANGE OF CORRESPONDENCE ADDRESS			

I hereby revoke all previous powers of attorney given in the above-identified patent.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

38091

OR

 I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified patent to:

 The address associated with the above-mentioned Customer Number.

OR

 The address associated with Customer Number: _____

OR

<input type="checkbox"/> Firm or Individual Name	
--	--

Address _____

City _____ State _____ Zip _____

Country _____ Telephone _____ Email _____

I am the:

 Inventor, having ownership of the patent.

OR

 Patent owner.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Inventor or Patent Owner

Signature		Date	1-27-10
Name	Bernard J. Cassidy	Telephone	
Title and Company	Director and Secretary, Tessera Intellectual Properties, Inc.		

NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 1 forms are submitted.